

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>cu</i>		<i>03 11 01</i>
O.I.P.E. CLASSIFIER		<i>43</i>	<i>3/29/01</i>
FORMALITY REVIEW	<i>md</i>	<i>579</i>	<i>5/23/01</i>

Response Formality Review *A.M.* *580* *08-10-01*

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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BEST AVAILABLE COPY

*5C-851*  
*08/10/01*